BERKELEY COUNTY PROBATE COURT MARRIAGE LICENSE APPLICATION

FOR STAFF USE ONLY – DO NOT FILL IN THIS SECTION

APPLICANT - A ☐ *APPLICANT – B* ☐

******PROVIDE YOUR CURRENT LEGAL NAME******

NAME: _____ _____ _____ _____
FIRST **MIDDLE** **LAST** (**SR, JR, III**)

LAST NAME ON BIRTH CERTIFICATE (*IF DIFFERENT*): _____

ADDRESS: _____ **CITY**: _____

STATE: _____ **ZIP CODE**: _____ **COUNTY**: _____

BIRTHPLACE (*STATE OR FOREIGN COUNTRY*): _____ **BIRTHDATE**: _____

AGE: _____ **RACE**: _____ **GENDER**: _____ **NUMBER OF THIS MARRIAGE** (*1ST, 2ND, 3RD, ETC.*): _____

PHONE NUMBER: _____ **SOCIAL SECURITY NUMBER**: _____

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